

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000003908

Entity Name: JENNINGS TRUCKING, INC.

FILED  
Feb 08, 2005  
Secretary of State

## Current Principal Place of Business:

515 N 17TH STREET  
FT. PIERCE, FL 34950

## New Principal Place of Business:

4410 AVENUE O  
FT. PIERCE, FL 34946

## Current Mailing Address:

515 N 17TH STREET  
FT. PIERCE, FL 34950

## New Mailing Address:

4410 AVENUE O  
FT. PIERCE, FL 34946

FEI Number: 65-1070248

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JENNINGS, TANGELIA  
515 N 17TH STREET  
FT. PIERCE, FL 34950 US

## Name and Address of New Registered Agent:

JENNINGS, TANGELIA  
4410 AVENUE O  
FT. PIERCE, FL 34946 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

02/08/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PCEO ( ) Delete  
Name: JENNINGS, LARRY  
Address: 515 N 17TH STREET  
City-St-Zip: FT. PIERCE, FL 34950

Title: D ( ) Delete  
Name: JENNINGS, LARRY  
Address: 515 N 17TH STREET  
City-St-Zip: FT. PIERCE, FL 34950

Title: VD ( ) Delete  
Name: JENNINGS, TANGELIA  
Address: 515 N 17TH STREET  
City-St-Zip: FT. PIERCE, FL 34950

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCEO (X) Change ( ) Addition  
Name: JENNINGS, LARRY  
Address: 4410 AVENUE O  
City-St-Zip: FT. PIERCE, FL 34946

Title: D (X) Change ( ) Addition  
Name: JENNINGS, LARRY  
Address: 4410 AVENUE O  
City-St-Zip: FT. PIERCE, FL 34946

Title: VD (X) Change ( ) Addition  
Name: JENNINGS, TANGELIA  
Address: 4410 AVENUE O  
City-St-Zip: FT. PIERCE, FL 34946

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TANGELIA JENNINGS

VD

02/08/2005

Electronic Signature of Signing Officer or Director

Date